

Work Order ID 87274

87274

Page 1

July-11-12 12:53:30 PM

Item ID: D3975-1

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Gas Cylinder

Start Date: 7/05/12 Start Qty: 8.00 ***8***

Cust Item ID:

Required Date: 8/03/12 Req'd Qty: 8.00 ***8***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
D3975	B

100 PURCHASING 0.00

100

Purchasing

Memo

Purchasing

Issue P/O:

17440

Possible Supplier: Clippard Instrument Laboratory

Part Number: Heavy Duty Brass Cylinder 7D1H

Material release note is required

CL 12/07/12 8

110 Receive & Inspect for Damage & Mat'l Certs 0.00

110

Packaging

Memo

Packaging

Ensure material certification is attached

8x SP 12-8-22

120 QC6- Inspect dimensions to drawing 0.00

120

QC

Memo

Quality Control

DAS 16 9-83 '2/26/12

(Signature)

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 87274

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Page 2

July-11-12 12:53:30 PM

Item ID: D3975-1 Accept ***N900040100*** Setup Start ***NS1***
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 Item Name: Gas Cylinder
 Start Date: 7/05/12 Start Qty: 8.00 ***8*** Cust Item ID:
 Required Date: 8/03/12 Req'd Qty: 8.00 ***8*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130						10			88 12-10-16
Small Fab	Memo	0.00							
Small Fab	Identify with vibrating stylus as per dwg D3975								
140	QC5- Inspect part completeness to step on W/O	0.00							
140						10			
QC	Memo	0.00							
Quality Control									
150		0.00							
150	Packaging					10X			88 12-10-17
Packaging	Memo	0.00							
Packaging	Identify as per dwg and Stock Location: <u>GA</u>								

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

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NOTE: Date & initial all entries

Work Order ID 87274***87274***

Page 3

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Revision ID:

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Item Name: Gas Cylinder

Start Date: 7/05/12

Start Qty: 8.00

8

Cust Item ID:

Required Date: 8/03/12

Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

160

QC21- Final Inspection - Work Order Release

0.00

160

QC

Memo

0.00

Quality Control

u 12.10.17

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

July-11-12 12:53:30 PM

Page 1

Work Order ID: 87274

Parent Item: D3975-1

Parent Item Name: Gas Cylinder

Start Date: 7/05/12

Required Date: 8/03/12

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A 10.05.27 as per ECN10-548 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
7D-1-H Clippard Brass Cylinder		Purchased	No			110	Each	0.0000	1	8		8x 8-12-8-22	

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

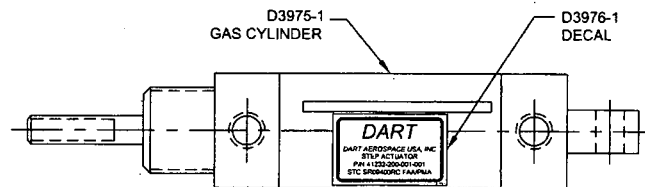
Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____
 Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

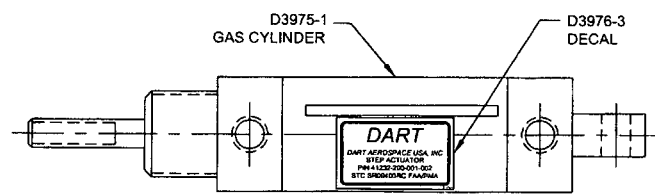
NOTE: Date & initial all entries

81274
R120712

ITEM No.	QTY -041	QTY -042	PART NUMBER	DESCRIPTION
1	X		D3975-041	GAS CYLINDER ASSEMBLY (LH)
2		X	D3975-042	GAS CYLINDER ASSEMBLY (RH)
3	1	1	D3975-1	GAS CYLINDER
4	1		D3976-1	DECAL
5		1	D3976-3 [△]	DECAL



D3975-041 GAS CYLINDER ASSEMBLY



D3975-042 GAS CYLINDER ASSEMBLY

RELEASED
2010-05-20

B	CORRECTED TYPO: D3976-3 WAS D3975-3 (ZN D7-1).	MB	10.04.13
A	NEW ISSUE	AJS	09.07.09
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE USA, INC	
DRAWN		PORT HADLOCK, WA	
CHECKED		DRAWING NO.	REV. B
MFG. APPR.		D3975	SHEET 1 OF 2
APPROVED		TITLE	SCALE
DE APPR.		GAS CYLINDER ASSEMBLY	NTS
DATE	10.04.13	<small>COPYRIGHT © 2009 BY DART AEROSPACE USA, INC THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.</small>	

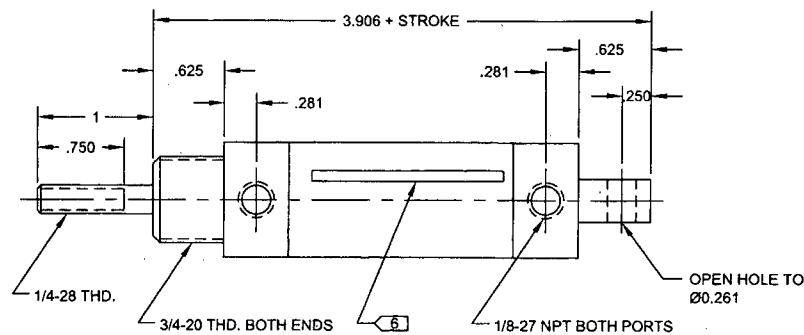
NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		



D3975-1 BRASS CYLINDER

NOTES:

- 1) MATERIAL: CROSS REFERENCE Era DRAWING 41232-200-007
PURCHASE P/N: HEAVY DUTY BRASS CYLINDER 7D1H
VENDOR: CLIPPARD INSTRUMENT LABORATORY, INC, CINCINNATI, OH.
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH Era P/N 41232-200-007-001 USING VIBRATING STYLUS
- 7) WEIGHT: 0.74 lbs APPROX
- 2) BORE: 0.875 INCHES
- 3) ROD: ROTATING.
- 4) 7D1H CONFIGURED WITH HYD. FLUID SEALS.
- 5) TEMPERATURE RANGE: 30° F TO 230° F.
- 6) MOUNT: UNIVERSAL MOUNT.
- 7) ACTION: DOUBLE ACTING.
- 8) STROKE: 1.000 INCH.
- 9) POWER FACTOR: 0.6 SQ. IN.
- 10) PORTS: 1/8 NPT.
- 11) ROD DIAMETER: 0.25 INCHES.
- 12) SINTERED BRONZE ROD BUSHING.
- 13) PRESSURE TEST: 2660 PSI (USE 5606 FLUID).

87274

RELEASED
R 2010-05-20

DESIGN	AS	DART AEROSPACE USA, INC	
DRAWN	J	PORT HADLOCK, WA	
CHECKED	9	DRAWING NO.	REV. B
MFG. APPR.	D	D3975	SHEET 2 OF 2
APPROVED	14	TITLE	SCALE
DE APPR.	14	GAS CYLINDER ASSEMBLY	NTS
DATE	10.04.13	COPYRIGHT © 2006 BY DART AEROSPACE USA, INC THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Invoice

WAINBEE LIMITEE
215 BOUL BRUNSWICK
POINTE CLAIRE, QUEBEC
H9R 4R7
Phone: 514-697-8810
Fax: 514-697-3070

REMIT TO ADDRESS
5789 Coopers Avenue
Mississauga, Ontario
L4Z 3S6

INVOICE #	11256585
LOCATION	11
DATE	08/21/12
PAGE	1 OF 1

TPS/GST# R105569941
TVQ#1012165214

BILL TO

127404
DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
K6A 1K7

SHIP TO D

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
K6A 1K7

ORDER NUMBER 15030224	ORDER DATE 08/09/12	SHIP DATE 08/21/12	CUSTOMER P/O NUMBER PO17440	PAYMENT TERMS CREDIT CARD
FOB Our Warehouse	WRITTEN BY Hugues Roy	SHIP VIA	WAYBILL# 898969944208	

PRODUCT / DESCRIPTION	QUANTITY OPEN	QUANTITY SHIPPED	QUANTITY BACKORDERED	LIST	DISC	EXTENSION
7D-1-H CLIPPARD BRASS CYLINDER	10	10	0	106.020	Net	1,060.20

PLEASE NOTE CURRENT PRICING

THANK YOU FOR YOUR ORDER

DAS
18
17/08/107

ORDERED BY: CHANTAL LAVOIE(TE

Sub Total
DEPOSIT APPLIED
ONTARIO SALES TAX/HST

1,060.20
1,198.03
137.83

INVOICE TOTAL

0.00

08/09/12 VISA XXXXXXXXXXXX0448 05/14 Auth Code: 073315 \$1198.03

RETURNED GOODS NOT ACCEPTED WITHOUT PRIOR AUTHORIZATION.
WAINBEE'S STANDARD TERMS AND CONDITIONS APPLY AND ARE AVAILABLE UPON REQUEST



WAINBEE LIMITEE
215 BOUL BRUNSWICK
POINTE CLAIRE, QUEBEC

Phone: 514-697-8810
Fax: 514-697-3070

From: Danielle Pelland

To: NO 2001 (COD) ENTETE (NO FILE)

Company: DART AEROSPACE LTD

Fax: 16136321053

Subject: INVOICE 11256585

VEUILLEZ S.V.P. EFFECTUER VOTRE PAIEMENT
A L'ADRESS SUIVANTE:

5789 COOPERS AVENUE
MISSISSAUGA, ONTARIO
L4Z 3S6

MERCI.

DANIELLE PELLAND
(514-697-8810 POSTE 1316)
COURRIEL: dpelland@wainbee.com

VEUILLEZ PRENDRE NOTE QUE TOUTES LES
FACTURES VOUS SERONT ENVOYEEES PAR
TELECOPIEUR AU NUMERO MENTIONNE PLUS
HAUT.

MERCI

DANIELLE PELLAND (TEL 514-697-8810)
dpelland@wainbee.com

SI VOUS PREFEREZ QUE LES FACTURES SOIENT
ENVOYEEES A UN NUMERO DE TELECOPIEUR
DIFFERENT OU ENCORE PAR COURRIEL A UNE
ADRESSE DE COURRIEL SPECIFIQUE, VEUILLEZ
AVISER DANIELLE PELLAND
AU 514-697-8810 POSTE 316 OU PAR
COURRIEL A : dpelland@wainbee.com

Please send all payments to:

5789 Coopers Ave.
Mississauga, Ontario
L4Z 3S6

Thank You,